NORTHERN	STATES DISTRICT N DISTRICT OF CA CAND 435 CAND Rev. 03/2013)			TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page.								COURT USE ONLY DUE DATE:			
1. NAME					2. PHONE NUMBER 3. EMAIL ADDRESS						4. TODAY'S DATE				
4. MAILING ADDRESS:					5. CASE NAME							6. CASE NUMBER			
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ 1					8. THIS TRANSCRIPT ORDER IS FOR: APPEAL CRIMINAL In forma pauperis (NOTE: Court order for transcripts must be attached) NON-APPEAL CIVIL CJA: Do not use this form; use Form CJA24									∍d)	
9. TRANSCRIF	PT(S) REQUESTED (Specify porti	on(s) and date(s) of proceedin	g(s) for wh	nich transcript is i	requested), 1	ormat(s) & qu	uantity and del	ivery type:						
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b.	b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)						Y TYPE (Ch	E (Choose one per line)			
DATE	JUDGE (initials)	TYPE	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME	
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10. ORDER &	CERTIFICATION (12	1. & 12.) By s	signing below, I certify that I wi	ll pay all c	harges (deposit p	olus addition	al).								
11. SIGNATURE						12	. DATE								
DISTRIBUTION:					☐ TRANSCRIP	TION COPY	Y □ ORDER RECEIPT				☐ ORDER COPY				